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FAX COVER SHEET

To: Examiner: Rina I. Duda
UNITED STATES PATENT AND TRADEMARK OFFICE
Art Unit: 2837

From: Lawrence Edelman

Fax #: (703) 872-9306

Subject: Paper: Revocation of Power of Attorney and New Power of Attorney, including
Change of Correspondence Address
Appl. Ser. No. 10/803,361
Applicant: Jerry D. Cashatt
Title: METHOD AND APPARATUS TO CONTROL INPUT TO AC INDUCTION MOTORS
Filing Date: 3/18/04
Atty Docket No. 01027.P1US

Date: April 27, 2005

Pages: 3, including cover page

Original(s) Will not follow via US Mail

Comments:

Please see attached.

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PTO/SB/21 (09-04)

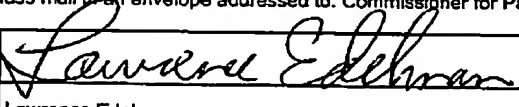
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/803,361	
	Filing Date	3/18/04	
	First Named Inventor	Jerry D. Cashatt	
	Art Unit	2837	
	Examiner Name	Rina I. Duda	
Total Number of Pages In This Submission	2	Attorney Docket Number	01027.P1US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Johnson & Stainbrook, LLP		
Signature			
Printed name	Lawrence Edelman		
Date	April 27, 2005	Reg. No.	25,226

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Signature			
Typed or printed name	Lawrence Edelman	Date	April 27, 2005

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/803,361
	Filing Date	3/18/04
	First Named Inventor	Jerry D. Cashatt
	Art Unit	2837
	Examiner Name	Rina I. Duda
	Attorney Docket Number	01027.P1US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

28778

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
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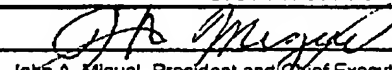
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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Johnson & Stainbrook, LLP				
Address	3558 Round Barn Blvd, Suite 203				
City	Santa Rosa	State	CA	Zip	95403
Country	USA				
Telephone	(707) 578-9333	Fax	(707) 578-3133		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	John A. Miguel, President and Chief Executive Officer		
Date	4-11-05	Telephone	(209) 357-7212

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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